

**2700 INTERNAL TRANSFER REQUEST FOR S.N.**

09/965,038

DATE: <u>2/28/02</u>	FROM: <u>T. Ghebretmariam</u> (print name)
FORWARD TO:	REASON(S):
A. Art Unit: <u>2661</u>	A. You had Parent <input type="checkbox"/> (check box)
B. Class: <u>370</u>	B. See Title <input type="checkbox"/> (check box)
C. Subclass: <u>201</u>	C. <u>See Abstract</u> <input type="checkbox"/> (check box)
	D. See Claim(s): <input type="checkbox"/>

FURTHER EXPLANATION IF NEEDED:

## Crosstalk Suppression

DATE: _____	FROM: _____ (print name)
FORWARD TO:	REASON(S):
A. Art Unit: _____	A. You had Parent <input type="checkbox"/> (check box)
B. Class: _____	B. See Title <input type="checkbox"/> (check box)
C Subclass: _____	C. See Abstract <input type="checkbox"/> (check box)
	D. See Claim(s): _____

**FURTHER EXPLANATION IF NEEDED:**

DATE: _____	FROM: _____ (print name)	
FORWARD TO CLASSIFIER	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s): _____	<div style="border: 1px solid black; height: 20px; width: 100px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100px;"></div>

**FURTHER EXPLANATION IF NEEDED:**

## DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	CLASSIFIER: _____
FORWARD TO:	REASON(S):
A. Art Unit: _____	A. You had Parent <input type="checkbox"/> (check box)
B. Class: _____	B. See Title <input type="checkbox"/> (check box)
C Subclass: _____	C. See Abstract <input type="checkbox"/> (check box)
	D. See Claim(s): _____

**FURTHER EXPLANATION IF NEEDED:**